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PTO/SB/21 (09-04)

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TRANSMITTAL FORM (To be used for all correspondence after initial filing)	Application Number	10821.720
	Filing Date	April 9, 2004
	First Named Inventor	Fespe Claro
	Art Unit	3785
	Examiner Name	Katherine M. Moran
	Attorney Docket Number	FC-03-01C01
Total Number of Pages in This Submission		21

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks The Commissioner is authorized to charge any deficiencies in fees and credit any overpayment of fees to Deposit Account No. 50-2019. Customer No. 30349		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Jackson & Co., LLP, 6114 Le Balle Avenue, #507, Oakland, CA 94611-2802		
Signature	<i>J. William Wigert</i>		
Printed name	William Wigert, Jr., Telephone: 510-852-8418, Facsimile: 510-852-6891		
Date	July 14, 2006	Reg. No.	24,582

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: 1-571-273-8300		
Signature	<i>Gerardo Ubau</i>	
Typed or printed name	Gerardo Ubau	Date 24 July 2006

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM	Application Number	10621,720
	Filing Date	April 9, 2004
	First Named Inventor	Felipe Claro
	Art Unit	3765
	Examiner Name	Katherine M. Moran
	Attorney Docket Number	FC-03-01C01
(To be used for all correspondence after initial filing)		
Total Number of Pages in This Submission	21	

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<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks The Commissioner is authorized to charge any deficiencies in fees and credit any overpayment of fees to Deposit Account No. 50-2019. Customer No. 30349		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Jackson & Co., LLP, 8114 La Salle Avenue, #607, Oakland, CA 94611-2802		
Signature	<i>J. William Wigert</i>		
Printed name	William Wigert, Jr., Telephone: 510-552-6416, Facsimile: 510-552-6601		
Date	July 14, 2006	Reg. No.	24,582

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Signature	<i>Gerardo Ubau</i>
Typed or printed name	Gerardo Ubau
Date	24 July 2006

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PTO/SB/17 (01-06)

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Fees pursuant to the Consolidated Appropriations Act, 2006 (P.L. 109-171)

FEE TRANSMITTAL
For FY 2006☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 125

Completeness if Known

Application Number	10/821,720
Filing Date	April 9, 2004
First Named Inventor	Felipe Claro
Examiner Name	3785
An Unit	Katherine M. Moran
Attorney Docket No.	FC-03-01C01

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ Note ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number 50-2019 Deposit Account Name: Jackson & Co., LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.18 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fees Paid (\$)
- 20 or HP =	x	=	

HP = Highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fees Paid (\$)
- 3 or HP =	x	=	

HP = Highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fees Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1-month Extension of Time and Terminal Disclaimer fee

Fees Paid (\$)

\$125

SUBMITTED BY

Signature

J. William Wigart

Registration No.

(Attorney/Agent) 24,582

Telephone 510-652-6418

Name (Print/Type)

J. William Wigart, Jr.

Date July 14, 2006

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 38 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

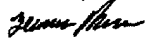
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Gerardo Ubau

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No.	:	10/821,720	Confirmation No.	1508
Applicant	:	Felipe Claro		
Filed	:	April 9, 2004		
TC/A.U.	:	3765		
Examiner	:	Katherine M. Moran		
Docket No.	:	FC-03-01C01		
Customer No.	:	30349		

Title: BASEBALL SYLE HAT WITH SIZE ADJUSTMENT

Mail Stop AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office action of **March 31, 2006**, please amend the above-identified application as follows:

Amendments to the Specification begin on page **2** of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page **3** of this paper.

Remarks/Arguments begin on page **12** of this paper.